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Bib Data Sheet

CONFIRMATION NO. 5801

SERIAL NUMBER 09/666,146	FILING DATE 09/20/2000 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. PM 268411
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APPLICANTS

Hilde Riethmuller-Winzen, Frankfurt, GERMANY;

Jurgen Engel, Alzenau, GERMANY;
 Ricardo Felberbaum, Lubeck, GERMANY; Klaus Diedrich, Grob-Sarau, GERMANY;
 Wolfgang Kupker, Lubeck, GERMANY;

** CONTINUING DATA *****

This appln claims benefit of 60/155,478 09/23/1999

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/14/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GERMANY	2	27	2
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

909
 PILLSBURY WINTHROP, LLP
 P.O. BOX 10500
 MCLEAN, VA
 22102

TITLE

Method for the therapeutic management of extrauterine proliferation of endometrial tissue, chronic pelvic pain and fallopian tube obstruction

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/155,478 09/23/1999 SH 1/12/01				
** FOREIGN APPLICATIONS ***** None SH 1/12/01				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/14/2000 -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>John H. H. H.</i> Initials		STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 27
INDEPENDENT CLAIMS 2				
ADDRESS Pillsbury Madison & Sutro LLP Intellectual Property Group 1100 New York Avenue NW Ninth Floor Washington, DC 20005-3918				
TITLE Method for the therapeutic management of extrauterine proliferation of endometrial tissue, chronic pelvic pain and fallopian tube obstruction				
FILING FEE RECEIVED 966	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	